



SERVIÇO PÚBLICO FEDERAL
MINISTÉRIO DA JUSTIÇA E SEGURANÇA PÚBLICA

ORIGENS PROJECT
DNA SAMPLE COLLECTION FORM FOR IDENTIFICATION

SECTION 1 - Donor Identification

Name of identified person:

Identification document number:

Issuing authority:

Date of Birth:

____/____/____

Gender ☐ Male

☐ Female

Does the identified person have an identical twin? ☐ Yes ☐ No

SECTION 2 - Informed Consent Form (ICF) (Right to Origin)

Informed Consent Form

This collection aims to voluntarily obtain the genetic profile of the provider, with the main objective of facilitating the exercise of the **Right to Biological Origin**.

1. The genetic profile obtained will be included in the Federal Police's genetic profile databases for comparison with profiles of possible biological relatives (biological fathers/mothers or other family members) who are also searching for missing persons.
2. In any case, the analyses performed at the Federal Police's forensic genetics laboratory **DO NOT allow** the disclosure of physical or behavioral characteristics of the individuals, except for the determination of gender (male or female).
3. The samples **MAY NOT** be included in genetic profile databases for criminal identification purposes or comparison with crime scene samples.

Consent for International Sharing

☐ I authorize the international sharing of my genetic profile under the category "person of unknown identity," should searches in Brazilian genetic databases yield negative results. The sharing is intended exclusively for the identification of the applicant through biological links with family members searching for missing persons.

SECTION 3 - Consent and Signature

I, the individual identified above, agree that a biological sample be collected to undergo a genetic identification examination (DNA examination), in accordance with the **Right to Biological Origin** purpose detailed in SECTION 2.

Signature of the Sample Donor (or legal guardian)

Id. (no./type): _____

ATTACH A COPY OF IDENTIFICATION DOCUMENT